

#### **Citizens Concerned for Human Life**

# Blair County Life News

Volume 15 Number 3

Presenting the Pro-Life Message to Blair County, Pennsylvania

Summer 2023

# **12-15 Week Abortion Limits**

Susan Rogacs, Chairwoman
Citizens Concerned for Human Life, Inc.
President, Board of Directors, PA Pro-Life Federation

There is a fast spreading "abortion compromise" that is extremely alarming—proposals to find a national abortion "Consensus" that would place abortion limits after 15 weeks of pregnancy. There are similar limitations being proposed that begin after the first trimester or 12 weeks of pregnancy.

The National Right to Life Committee and The PA Pro-Life Federation are opposed to arbitrary abortion bans that would allow **93-95**% of the abortions to continue. There is no principled explanation for aborting a child at 14 weeks but not at 15 weeks.

Those seeking a national Consensus on abortion risk misleading individuals into accepting a 12-15-week ban to "solve" divisions over this issue, a position that would save only about 5% of the babies from the horror of abortion.



Unborn Child at 14-Weeks Gestation

Some may claim that placing politically expedient limits on abortion achieves "incremental" progress. However, the *Dobbs* decision made it clear that there is no reason to place self-imposed restraints on any pro-life legislation, especially now when any affirmative pro-life legislation is doomed to fail at the federal and state levels.

Consensus does not indicate progress, it indicates finality. It is highly unlikely that states passing these laws now will want to open them up to revision later. Legislators could see any abortion limits as a solution to the battles over abortion and a way to get this behind them. All efforts to achieve further pro-life goals would come to a halt.

The best strategy for the pro-life movement now is to promote **principled legislation when politically feasible** that protects the lives of mothers and their children. The Consensus language seriously undermines these goals. ◆

# How do you respond to those who say that taking mifepristone is "safer than taking Tylenol"?

By Randall K. O'Bannon, Ph.D.



Editor's note: Chemical abortions ["medication abortions"] now account for the deaths of over 50% of the babies lost to abortion. There are many reasons for the huge increase but likely at the top is the blatant lie that "medication abortions" are "safe" and, indeed, "safer than taking Tylenol."

We asked Dr. Randall K. O'Bannon, NRLC's Director of Education & Research, to address this defense of the first of the two drugs that make up medication abortions.

Considered in terms of deaths per dose, it simply isn't so. What you have here is a not-so-clever statistical sleight of hand. Advocates try to get you to compare the number of deaths from a relatively lightly used product with one that is used billions of times by people every year.

We are told that about 150 American die from Tylenol use every year, usually by overdose or simply taking too much over an extended period of time. At the same time, the FDA tells us that there have been 28 deaths that we know of among American mifepristone patients since the drug was approved in 2000. So, 28 deaths from mifepristone in twenty years against 150 deaths from Tylenol in just a single year's time? Sounds like mifepristone is safer.

But wait. That's 150 Tylenol deaths against a backdrop of 25 billion doses of Tylenol in a year. We're told that there have been only 5.6 million total chemical abortions with mifepristone in the U.S. since that 2000 approval. That is less than a thousandth of the sales of Tylenol in a single year. Note what this does to your risk factor.

Using the minimal figures provided by the FDA, your risk of dying from taking mifepristone is about 1 in 200,000. Not large, but not negligible. And remember that your risk of a complication putting you in the emergency room is closer to one in 10. But your risk of death from Tylenol is actually something like one chance in 166.7 million, even including those who overdose and fail to follow the manufacturer's instructions.

This means that your risk of dying from mifepristone is about 833 times your risk of dying from Tylenol! The statement that mifepristone is safer than Tylenol is clearly false.

-National Right to Life News Today, May 12, 2023

### Need Help in a Crisis Pregnancy?

#### **Crossroads Pregnancy Help Center**

212 Frankstown Rd., Altoona

814-201-2147; website: crossroadspcs.org

#### **Every Life Matters (ELM)**

1351 Logan Ave., Tyrone 814-650-7899; TheELMPSS@gmail.com

#### Precious Life, Inc.

1716 12th Ave., Altoona 814-944-2669; website: preciouslifeinc.com

#### Real Alternatives, Inc.

1-888-LIFE-AID; website: realalternatives.org

## Project Rachel

814-884-8000; ProjectRachel@dioceseaj.org

#### Rachel's Vineyard

877 HOPE 4 ME (877-467-3463) website: rachelsvineyard.org/

#### **Family Life**

Diocese of Altoona/Johnstown Pastoral Guidance 814-886-5551; familylife@dioceseaj.org

#### **UPCOMING EVENTS**

June 23-24—National Right to Life Convention Pittsburgh; nrlconvention.com

#### October 28—Statewide PA Pro-Life Federation Banquet

Hershey Lodge and Convention Center For more information, call 717-541-0034

#### Bedford County CCHL You are not alone, you have HOPE!

ver 47% of all abortions performed in Pennsylvania are done in Philadelphia. Being the ONLY pregnancy help center in center city Philadelphia, surrounded by 12 abortion clinics within a five-mile radius, the **HOPE Pregnancy Center** struggles with increasing costs as they save pre-borns from abortion by helping Moms.

Bedford County CCHL has over 25 churches participating in its Baby Bottle Fundraiser for the HOPE Pregnancy Center. Since one of HOPE's major costs is paying nurses to take ultrasounds, we decided that our fundraiser will help pay for ultrasounds. In 2018 we raised enough money to pay for 137 ultrasounds! Thanks to the generosity of our sponsors, Bedford County CCHL pays for all expenses. So EVERY CENT donated goes to HOPE.

See HOPE's website at **www.hopepregnancycenters. org.** If you can help them help moms, there is a "donate" page on their website.

## **2023 Oratory Contest Winners**

Printed below are the entries of Second-Place Senior and Junior Varsity winners, Matthew Levri and Mark Sicree, respectively. First-Place winning presentations were highlighted in the Spring 2023 issue of *Blair Life News*. Third and Fourth-Place entries will be reprinted in the Fall 2023 issue.

**Matthew Levri** is a junior who is homeschooled. Matthew was awarded \$150 for his Second-Place entry in the Senior Varsity contest. Matthew is the son of Ed and Maureen Levri of Altoona. **Mark Sicree**, a freshman, is homeschooled and won the Second-Place Junior Varsity prize of \$100. Mark is the son of Andrew and Rebecca Sicree of Boalsburg.

## How to Get More Grace Bucks

By Matthew Levri, Second-Place Senior Varsity Winner



Hello! I went to the March for Life this year for the first time in years. The last time I went I think I was around six-years-old and I went up with my family. I don't remember a lot, I was six after all, but one thing I definitely remember was the gruesome presentation of dead, aborted babies on lots of posters and screens. It scared me so much as a six-year-old. I remember as we were marching, I was holding my mom's hand and I was trying to keep my head down not looking at anything. It was a bit of a hard trip.

After that I didn't want to go to the March for Life for a few years because I didn't want to see that horrible image again. As time went on, I thought, "I can probably handle it now. I was a six-year-old. It probably isn't that bad."

Skip a few years further and I decide to go to the March this year. I got to go with some of my family and some of my best friends. It was big, it was sunny, it was good. There were so many happy, smiling people that we were marching with. It's inspiring to see how many other people share the same or similar priorities that you do. But, then, as we were marching

by this one turn, you can see, in the corner, a giant screen showing horrible footage of the bodies of unborn babies. It was ugly, it was gruesome, it was scary. And I thought, "Six-year-old me was right: this is terrifying!"

As you march by, you can feel everybody around you get really uncomfortable. Nobody wants to see that. It's horrible. But I can see why it's there. People want to show those who are considering abortion or have had abortions these horrible shots, to show them the brutal truth. It makes sense, some people need the truth pounded into them, and admittedly it got me praying a lot harder. But it's so loud, as we were walking away from it, I felt like I just got yelled at. It's a real punishment. As a six-year-old, I was horrified by it. And I am still horrified by it. I thought, "Man, how are we going to stop this?"

But then as we were marching, I heard this soft sound. It was the Franciscan Friars of the Renewal. We looked it up. They were saying the rosary. It was so soft, even as people are showing these horrible clips, there was so much comfort in that prayer, and my friends and I joined in the prayer as we were marching. It was beautiful. We had never met them before, by the grace of God we just so happened to be next to them. I'm so glad they were there, it was a great experience. And then it got me thinking about how much good prayer really does.

It's hard to measure prayer. It's not like when you're done with your Chaplet or your morning prayer, God pops up on your phone and says, "Hey! Great job—you saved five souls today! And you earned 200 Grace bucks!"

At the same time, I know it's immensely good and something we should all practice, but how much good does it really do?

I was shown a video. It was about a man who was just going for a run in a place he normally doesn't run, and as he's running by, he sees this ambulance stopped at a house. And he thinks to himself, "What can I do? I don't have any medical experience; I don't have the skills to help out." So, he keeps running, but not without saying a Hail Mary.

A week or two later, he's running by the same place and this woman calls out to him. The man turns and he doesn't know this woman, but the woman finally gets him to stop. And the woman says, "You saved my life."

And the man says, "No, I didn't, I've never seen you before."

But the woman says, "Yes, you did. Last week I was dying and an ambulance came to the house and Jesus appeared to me and said, 'You were going to die today.'...And He put out his palm and the man's face is on Jesus's palm. 'But because of this man's prayer you are saved.'

That was one Hail Mary, just one! The runner didn't get down on his knees and start levitating with a ray of heavenly light shining over his head, but it had the same effect. He just silently said a Hail Mary. That's powerful, something we sometimes take for granted can be so profoundly effective. Now when praying, you're giving in to God's will, that doesn't mean you're always going to get what you prayed for, but no prayer is ever wasted. And you're probably going to get a lot of Grace bucks.

I love the fact that Jesus himself appeared to the woman. It could have been an angel, it could have been a saint, but no, Jesus himself appeared to her—to me that says a lot.

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#### **How to Get More Grace Bucks**

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I think it shows he really does hear all prayers. And he's not just the guy upstairs who's ridiculously overworked in his incredibly cluttered office scrambling to receive calls while texting and emailing and all that. No, he is literally love. He will always make time for anyone who asks. He really does want a personal relationship with each and every one of us. Including those of us who aren't born yet, even those who have abortions, even those doctors who think of it as nothing more than another day at work. In conclusion, the most effective way for us to change hearts and lives is through prayer. •

# The Right to Life

By Mark Sicree, Second-Place Junior Varsity Winner



"That we are each endowed with the right to liberty and the pursuit of happiness. Be clear, these rights were not bestowed upon us, they belong to us as Americans."

This may seem like a quote from the Declaration of Independence but it's not. This is Vice President Kamala Harris's version of the Declaration. The real Declaration actually states: "We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness."

You might notice something different about what Kamala Harris said was in the Declaration of Independence and what actually is in it. This is because Kamala Harris's version of the Declaration is an edited version. And that is not okay. She gave her edited version of the Declaration of independence during her speech commemorating the 50th anniversary of *Roe v. Wade.* You might have noticed the words she omitted from her speech were

"Creator" and the Right to "Life." Naturally, this was easily caught, and I think that is a horrible thing to do, to just to omit something like that from the document knowing what it stands for. It is a terrible thing that many other people are also trying to bend what our country stands for and believes in—just like Kamala Harris.

Just recently at the March for Life this year, a group of teenagers wearing ski caps stating "Rosary, Pro-Life" were visiting the Smithsonian Air and Space Museum after the March. When they were told to remove their hats by museum staff, they refused, stating that they were wearing them to easily identify who was in their group. The staff then told the students that this was a "neutral zone" and proceeded to call them expletives before kicking them out of the museum. As they were leaving, one of the staff members was supposedly "rubbing his hands together with glee."

This is a clear violation of the First Amendment by a government-funded organization and a clear example of people trying to ignore the Constitution to favor their opinions.

Sadly, this was not an isolated incident. On the same day, not too far away, a different group of students was visiting the National Archives wearing pro-life T-shirts. When told by the staff to cover up their T-shirts or leave, the students refused. And when one of the students asked, "What about the First Amendment?" they were told by a member of the staff that "The First Amendment does not apply here." Then the students were kicked out of the Archives. Ironically the National Archives is where the Constitution is stored, but that didn't seem to stop the staff from bending it to favor their views over others.

Just three days later, the Richmond, Virginia division of the FBI issued an internal memo called "Interest of Racially or Ethnically Motivated Violent Extremists in Radical-Traditionalist Catholic Ideology Almost Certainly Presents New Mitigation Opportunities." This memo identified certain Catholics as "potential terrorists." It says that what makes these Catholics "potential terrorists" was going to Latin Mass, being conservative, and holding traditional views about marriage and sexuality. The memo told Bureau employees to infiltrate churches and spy on Mass-goers to find these "potential terrorists."

Not only is this wrong, this is a blatant act of religious discrimination by a government organization. It may seem like much of the government intentionally forgets about the First Amendment when it comes to an opinion they disagree with or find offensive. But this isn't true with everyone, as shown by that fact that at least one person in the FBI realized what the memo was and leaked it. After it was leaked, many state attorney generals in almost half of the United States began speaking out against the FBI's anti-Catholic memo. They wrote and signed a formal letter telling the FBI what they did was wrong. And due to the massive backlash, the FBI retracted their memo.

Now after all was said and done, the National Archives and the Smithsonian were sued for these blatant transgressions. So far, only the National Archives issued a formal apology to the students and is going to give them a guided tour of their museum. The Smithsonian issued an apology to the public and Congress, but may not have apologized to the students themselves.

Even though the lawsuit is still pending, I believe that things will change for the better within the government and our country as a whole. I believe that a respect for all rights will arise not only for the right to free speech and religion, but also for the right to life—just like the Declaration of Independence says. ◆

# An Open Letter to Minnesota Lawmakers The End-of-Life Option Act is Evil

By Jeffrey Wald

ear members of the Minnesota Legislature:

Earlier this year, a group of you introduced the End-of-Life Option Act SF 1813/HF 1930. If this act is passed and signed into law, Minnesotans would have access to medical aid in dying (i.e., euthanasia would become legal in Minnesota).

Although the word "evil" has fallen into disfavor these days, I wish to call a spade a spade. The End-of-Life Option Act is evil. As your fellow Minnesotan, I implore you: Don't join the growing number of states that license murder.

There is much that I could write in opposition to this bill. How it redefines longstanding medical and legal concepts such as a doctor's standard of care, suicide, murder, and medication. How it condones despair. How it permits the aiding and abetting of the taking of innocent human life. But all of that would involve an appeal to reason and common sense. And the very fact that this act has been introduced and is being debated suggests that we have moved beyond reason and common sense. I will therefore appeal not to your mind, but your heart.

If passed into law, this act would allow a qualified medical provider to issue a "prescription for medical aid in dying medication" to a "qualified individual." A "qualified individual" is defined as someone who has a "terminal disease." A "terminal disease" means "an incurable and irreversible disease that has been medically confirmed and will, within reasonable medical judgment, produce death within six months." In other words, if you are an adult and receive a diagnosis of six months left to live or less, you are eligible—with a doctor's prescription—to kill yourself.

On Easter Sunday 2007, my mother was diagnosed with stage-four liver and colon cancer. She was told she would die within six months. At the time, she didn't inform her seven children of this. I learned about it later, from my father, after my mother had passed away approximately seven months after her diagnosis. If the End-of-Life Option Act had been in effect in North Dakota, where my parents lived, my mother could have been legally prescribed the medical aid in dying (MAID) medication. If she'd taken it, she would have been spared enormous physical suffering: sleepless nights, nausea and vomiting, incredible abdominal pain, six months of wretched chemotherapy, insufferable heart burn, the loss of her hair, the withering of her body. And it would have spared her the agony of her last week of life—just after Thanksgiving, when the whole family was together for the last time—when she descended first into semi-conscious torment, and then unconsciousness, lying first on our twenty-year-old floral-pattern couch, so worn my father placed a board underneath the cushions for support, and then on the hospice bed she died in on November 29, 2007, surrounded by her husband and children.

Yes, the medication would have spared her untold suffering. But it would have robbed her of much else besides. The opportunity to meet a grandchild, my oldest brother's son, born in May 2007, the only one of some twenty-plus grandchildren that my mother had the opportunity to meet.

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#### **End of Life Option Act is Evil**

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The occasion to bury her father, that hardy North Dakota farmer who, it seems, could not bear the thought of seeing his only daughter pass before him and who died in August at age ninety-three, just months before my mother.

The time to say a long goodbye to her children, especially her youngest, a mere thirteen years old when she passed. The only one of the seven children still at home, a sort of miracle baby born when my mother was forty-three, and whom she homeschooled to the end.

The opportunity to meet my wife—at the time, she was only a friend, but we were already in love, and my mother sensed this—when I came home in October with two vehicles full of college friends. We ate my mother's cooking, and prayed over her, and truly believed in a miracle, not knowing or believing that this still vibrant woman would be dead within a month.

The chance to be a witness, and a light, and a beacon of hope to so many—those in her small town, but also people around the country. In her last months, she posted inspirational CaringBridge messages about how she accepted her suffering as redemptive and purposeful, drawing her closer and closer to the heart of Christ through Saint Faustina.

The MAiD medication would have robbed her of that last Thanksgiving, when the whole family gathered for one last family photo, mother looking surprisingly splendid and lovely—yes, nearing death, but still vibrantly alive, death clearly not having victory over her.

And perhaps most important, the MAiD medication would have robbed her of the grace of reconciliation between her and her husband. I don't know all the hurt and wounds of my parents' marriage. And it wouldn't be my story to tell if I did. But I do know there was hurt. And I do know there were wounds. But I also know there was healing and forgiveness in those last seven months. At my mother's packed funeral, my father, who loved to talk to strangers about sports and shared acquaintances and such, but who was reticent in personal matters, spoke about the gift of those months spent learning to give and receive love and forgiveness again. During my mother's cancer journey, in the hiddenness of that crusty ranch house in middle-of-nowhere North Dakota, in the long hours of the night as my father learned to care for his ailing wife, there was healing. Healing of her body? No. But there is something more important than the earthly body, more lasting, of greater eternal weight. My mother's soul was sanctified those seven months, and my father brought near to Christ.

Senators and representatives of Minnesota, there is something more painful than physical suffering, worse even than death: Being told, and believing, that your life is worthless, and that you would be better off dead. The End-of-Life Option Act speaks this evil lie. So please, Minnesota legislators, defeat it.

Jeffrey Wald writes from West Saint Paul, Minnesota.

-First Things, May 16, 2023

#### Patients Increasingly Starved to Death

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Consequently, we must protect ourselves from these godless and faceless decision makers. There are basic but critically important ways you and your family can protect yourselves. A good start is to make certain you have a trusted pro-life doctor who recognizes our God-given human dignity and acts accordingly towards you and your family.

Perhaps more importantly, however, is appointing a health care agent in a healthcare durable power of attorney. MyLifeAngels (MLA), a new concept created exclusively to protect you and your family, helps ensure that your family will receive the life-affirming care you desire.

MLA starts by helping you choose your health care agent, and then creates your state-specific Healthcare Durable Power of Attorney and securely stores it and other legal documents in their digital vault available anytime and anywhere on your smartphone.

MyLifeAngels' patent-pending solution immediately notifies your loved ones if you enter a hospital emergency room and gives them immediate access to your protective documents and information. It also alerts ER staff to key information, such as allergies to medications and health conditions, and provides your health care agent and Care Circle contact information.

It has been over 17 years since my family established the Terri Schiavo Life & Hope Network to serve as patient advocates, aiding families who are in crisis when their loved ones are confronted with the denial or withdrawal of treatment. We established this non-profit organization in response to the 2005 court ordered starvation and dehydration death of my sister, Terri Schiavo.

Since our inception, we have been involved in more than 4,000 cases. I could have never anticipated the types of agonizing calls we would receive from families whose loved ones are being sentenced to death by the people charged with caring for them.

After almost two-decades of working to help patients receive the care they deserve, it has become clear that medical decisions have shifted from patients and family members to outsiders—effectively strangers—when patients have not legally appointed a health care agent prior to a medical crisis.

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## Is Hospice an Antidote to Assisted Suicide?

By Julie Grimstad

The goal of palliative care is to relieve symptoms—including pain and stress—at any stage in a serious illness. Palliative care can be provided in conjunction with curative or life-prolonging treatment. Hospice is a subset of palliative care. Hospice provides comfort care when a person no longer has curative options or has chosen to forgo treatment because the burdens of treatment outweigh the benefits. The founding principles of hospice were to maintain dignity, to increase quality of life, and to provide comfort and pain control. When these principles are followed and staff members are trained in proper pain management, hospice can be a blessing for people in need of expert end-of-life care.

Unfortunately, there is a growing trend to misapply palliative medications to make people die, particularly in the hospice care setting.

Because people who are receiving hospice care have a limited life-expectancy, it is the "ideal" setting for stealth euthanasia. The term "stealth euthanasia" means to cause a patient's death while protonding to provide appropriate and of-life care. Patients and

pretending to provide appropriate end-of-life care. Patients and families must be vigilant.



"Numerous reports from families of hospice and palliative care patients indicate that a one-size-fits-all pattern of administering a combination of opioids and anti-anxiety drugs has emerged. Whether or not patients have pain and / or agitation, they may begin to receive these drugs upon admission." [Quote from "Drugs Commonly Used in Hospice and Palliative Care," Making a Difference, A Guide for Defending the Medically Vulnerable, www.halovoice.org]

Here is a typical report that HALO receives from grieving family members. Their loved one was alert and not complaining of pain. After admission to hospice, increasingly frequent and larger doses of pain medications, anti-anxiety drugs, and sedatives were administered to the point where he or she was sleeping all the time and could not eat or drink. Some reported that patients were denied usual medications to control blood pressure, diabetes, heart disease, infections, etc.

Sometimes, hospice is promoted as an antidote to assisted suicide. There is merit in the argument that we should ensure patients don't commit suicide because they are not receiving adequate treatment to manage pain and other symptoms. However, Oregon's experience suggests that hospice care is not an antidote to assisted suicide. In 2020, it was officially reported that 95% of patients who killed themselves using Oregon's so-called "death with dignity" law were enrolled in hospice at the time of death.

It is significant that the American Academy of Hospice and Palliative Medicine (AAHPM) "takes a position of studied neutrality on the subject of whether PAD [physician-assisted death] should be legally permitted or prohibited." Neutrality gives the green light to assisted suicide as surely as support does.

Also, there is more than one way to assist a suicide. For instance, some hospices facilitate Voluntary Stopping Eating and Drinking (VSED), particularly in states that do not permit physicians to prescribe drugs for patients to commit suicide. VSED means that a patient, who is capable of eating and drinking, chooses to refuse food and fluids with the intention to cause death. This is suicide. When a hospice supports this decision by providing palliative care as the patient starves and dehydrates to death, the suicide is assisted—not prevented—by the hospice.

The only real antidote to assisted suicide is to make it illegal everywhere, in all circumstances, and by any means. The law is a great teacher.

For information on end-of-life care, visit HALO's site at halovoice.org.

- American Life League, May 22, 2023

# "...I fear the power of choice over life or death at human hands.

Isee no human being whom I could ever trust with such power—not myself, not any other. Human wisdom, human integrity are not great enough. Since the fetus is a creature already alive and in the process of development, to kill it is to choose death over life. At what point shall we allow this choice? For me the answer is—at no point, once life has begun. At no point, I repeat, either as life begins or as life ends, for we who are human beings cannot, for our own safety, be allowed to choose death, life being all we know."

Pearl S. Buck. Foreword to Robert E. Cooke and others, ed., The Terrible Choice: The Abortion Dilemma (New York: Bantam Books, 1968), ix-xi, x.



# Caring *not* Killing

Many people believe, when they are faced with a life-threatening illness, experience serious health problems, or are nearing death, that euthanasia or assisted suicide should be an option.

The fears that lead someone to consider euthanasia or assisted suicide are real and legitimate. Each fear has a corresponding life-affirming answer. For many people who are lonely, suffering, and/or possibly dying, the prospect of death by lethal injection gives them a feeling of control over their helplessness. There is no reason for a person to suffer uncontrolled pain, feel they are a burden on family or other caregivers, feel abandoned in their time of greatest need, or fear receiving unwanted medical treatment without consent.

Before considering euthanasia or assisted suicide, you need to know certain facts.

#### WE OPPOSE EUTHANASIA AND ASSISTED SUICIDE

For the following reasons:

- 1. They undermine the truth that intentionally killing a human being is always wrong.
- 2. They erode the respect and equality of every human being and establish killing as a solution to problems that are best solved by caring options.
- 3. They destroy the trust relationship between medical professionals and patients. People will fear for their life when they are in need of help.
- 4. They threaten the lives of those experiencing depression, the most common factor in suicide attempts. Many requests for an assisted death will be granted when help is what the person requires.
- 5. They threaten the lives of people with disabilities, the elderly and the chronically ill who may be vulnerable to friends, family members and/or medical care givers who question their quality of life.
- 6. People may be pressured into "choosing" death by lethal injection or killed without giving informed consent. One person's freedom to "choose" death may be the only "choice" offered to someone else.



- 7. Elder abuse and the abuse of people with disabilities is a prevalent social scourge. Safeguards will never protect vulnerable persons.
- 8. If killing is an acceptable solution for one problem, what other problems will killing become a solution for?

## SOME PEOPLE WANT TO DIE BY EUTHANASIA OR ASSISTED SUICIDE BECAUSE THEY ARE FEARFUL

- They fear experiencing uncontrollable pain.
- They fear being abandoned or left alone in their final days.
- They fear being a burden on family members and other caregivers.
- They fear living with terminal illness and losing their abilities or personal autonomy.
- They fear the process of dying naturally.

## EUTHANASIA AND ASSISTED SUICIDE ARE NOT NECESSARY

- Everyone has the right to refuse unwanted medical treatment.
- Withholding or withdrawing medical treatment is a legal and common medical practice.
- Withholding or withdrawing medical treatment is not the same as euthanasia or assisted suicide.
- Pain management and palliative care can effectively control almost all types of physical pain.

#### PROPER PALLIATIVE/HOSPICE CARE

- Provides relief from pain and other distressing symptoms.
- Affirms life and regards dying as a normal process.
- Neither hastens nor postpones death.
- Integrates the psychological and spiritual aspects of patient care.
- Offers a support system to help patients live as actively as possible until death.
- Offers a support system to help the family cope throughout a patient's illness and during bereavement.
- Uses a team approach to address the needs of patients and their families.
- Enhances quality of life, and can positively affect the course of illness.
- Is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, and includes investigations needed to better understand and manage distressing clinical complications.

What is more humane—to eliminate the suffering in a person,

or to eliminate the person who is suffering?

~ Brian Pollard, palliative care specialist ~

#### **Contact Information**

### <u>President</u> President Joseph Biden (D)

The White House Washington, D.C. 20500 Opinion Line: 202-456-1111, M-F, 9-5 www.whitehouse.gov/contact/

### <u>Pennsylvania U.S. Senators</u> The Honorable Robert P. Casey, Jr. (D)

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#### The Honorable John Fetterman (D)

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The Honorable John Joyce (R) U. S. House of Representatives

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#### **Blair County Office**

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#### Governor of Pennsylvania

The Honorable Josh Shapiro (D)

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### <u>Pennsylvania State Representatives (Blair County)</u> The Honorable Jim Gregory (R)

District 80-Allegheny Twp. (part), Antis Twp., Bellwood Bor., Blair Twp., Catharine Twp., Duncansville Bor., Frankstown Twp., Freedom Twp., Greenfield Twp., Hollidaysburg Bor., Huston Twp., Juniata Twp., Martinsburg Bor., Newry Bor., North Woodbury Twp., Roaring Spring Bor., Snyder Twp. (part), Taylor Twp., Tyrone Bor. (part), Tyrone Twp. (part), Williamsburg Bor., Woodbury Twp.

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#### The Honorable Louis C. Schmitt, Jr. (R)

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Altoona Office

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## **Legislative Update**



# "Reproductive Rights" Amendment

Pro-abortion Democrats in the Pennsylvania House of Representatives have introduced a Constitutional Amendment that would wipe out our pro-life laws.

The so-called Reproductive Rights Amendment (House Bill 803) is a dangerous bill that would end parental consent, informed consent, and the 24-hour waiting period for abortions in Pennsylvania. It would also remove protections from preborn babies in the latter stages of their mothers' pregnancies.

Please contact your state representative and urge him or her to oppose House Bill 803. To send an immediate message to your state representative, go here: https://oneclickpolitics.global.ssl.fastly.net/messages/edit?promo\_id=18546.

Share this message with your prolife chapter members, friends, family members, and all appropriate lists.

#### **Tax-Payer Funding of Abortion**

A package of bills has been introduced in the Pennsylvania House of Representatives which would clear the way for large scale taxpayer funding of abortion in PA.

Please send an immediate message to your state lawmakers opposing taxpayer funding of abortion. You can send a message now by going here: https://oneclickpolitics.global.ssl.fastly.net/messages/edit?promo id=14369.

www.paprolife.org 717-541-0034

#### Pennsylvania Gov. Shapiro Launches Web Site Explaining How to Kill Babies in Abortions

Pennsylvania's pro-abortion Governor Shapiro has launched a new website dedicated to all things abortion. The website includes an interactive map for locating an abortionist...a section on "Make a Plan" to abort...and links to organizations that will provide money for abortions.

The Shapiro Administration claims the website is a response to the Northern District of Texas ruling reversing the FDA's questionable approval of the abortion pill more than 20 years ago.

Of course, the Governor's news release fails to mention the 28 women who have died after taking the dangerous drug mifepristone. The release also omits the pertinent fact that chemical abortions have four times the complication rate of surgical abortions.

He said, "My Administration is exploring every possible action we can take to keep medication abortion accessible, expand access to reproductive care, and continue safeguarding the freedom to choose—including defending abortion access..."

The Pennsylvania pro-abortion website is just the latest effort by the Shapiro Administration to increase abortions. In February, Shapiro joined something called the "Reproductive Freedom Alliance," a consortium of 21 pro-abortion Governors aiming to promote abortion.

This year, pro-abortion Democrats took over control of the Pennsylvania House of Representatives. But Shapiro's pro-abortion agenda can still be stopped in the state Senate, which remains under the leadership of prolife Republicans.

—Excerpt from LifeNews, April 17, 2023 Maria Gallagher is Legislative Director and Political Action Committee Director for the Pennsylvania Pro-Life Federation; she has written and reported for various broadcast and print media outlets, including National Public Radio, CBS Radio and AP Radio.

Maria Gallagher's new book, *Mercy's Power*, is now available on the Shop Mercy website. The book is designed as a spiritual guide for living out the Gospel of Life. Feel free to share this link with pro-life friends and family members:

https://shopmercy.org/mercy-39-s-power-inspiration-to-serve-the-gospel-of-life.html



#### Patients Increasingly Starved to Death

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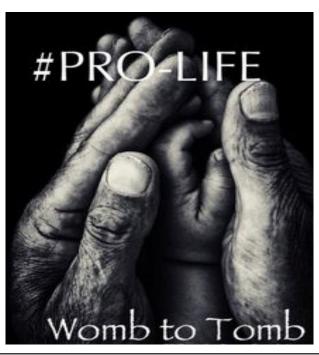
I firmly believe that if MyLifeAngels was available when my sister Terri experienced her unexplained accident, because of the discord that had developed in her volatile marriage, there is no doubt she would have chosen my parents as her legal guardians and avoided having to be barbarically put to death by her estranged husband.

We need to fully understand the times in which we live; that together with our three government branches, academia, the corporate media, Hollywood, our churches, and even today's collegiate and professional sports, the healthcare industry has also been infiltrated by extremists who are hostile to a Judeo-Christian belief system.

In this intensifying secularized world, the respect for the sacredness of life, traditional family values, and common decency are collapsing, and it is now our responsibility to safeguard ourselves and defend our loved ones.

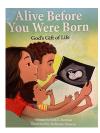
We need to accept the fact that there may be a situation where you will have to confront this medical apparatus and literally fight for your life, your children's lives, or another family member's life.

-LifeNews.com, February 20, 2023



#### Alive Before You Were Born-God's Gift of Life

by Kim E. Bestian, illustrated by Steliyana Doneva Before you were born, God knew you and loved you...This beautiful concept book helps adults lay a foundation for belief in the sanctity of life, reinforcing a biblical truth that will stay with children and guide their lives as adults.





Blair County Life News
Blair County Chapter
Citizens Concerned for Human Life, Inc.

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Citizens Concerned for Human Life, Inc. is a non-profit, non-partisan, non-denominational organization dedicated to educating and upholding the truth about abortion, infanticide, euthanasia and embryonic stem cell research. CCHL is composed of chapters made up of persons of all ages, sexes, races and cultural backgrounds. CCHL, Inc. is an affiliate of the PA Pro-Life Federation and the National Right to Life Committee. Donations are not tax-deductible.

2715 Third St., Altoona, PA 16601; phone: 814-946-0681 email: blair@centralpaprolife.org website: www.blaircountyprolife.com

### From the President's Desk

#### Where Have All the Flowers Gone?

This past Memorial Day, I started to reminisce about life and told my oldest daughter about a "Gold Star" mother who lived next to my childhood church in Huntingdon. As a youth I didn't realize the significance of the heartbreak involved in that award.

My grandson, Joseph, and my daughter, Mary, planted flowers that weekend. Joseph, who is almost two, had a difficult time pronouncing "flouers."

This caused me to remember the old '60's tune which is the title of this column. I went to the computer to look up the lyrics and watch a video of Pete Seeger singing the song. The lyrics have so much meaning because they speak of the loss of young life in war like the "Gold Star" mother experienced.

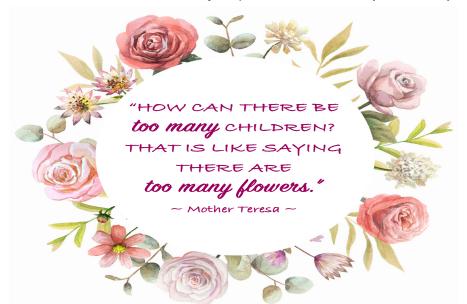
All of this reminded me of the battle that we are engaged in today. It is a different fight than that memorialized in the song, but it has the same meaning, although not the same effect on those involved.

When Mother Teresa was asked, "Are there too many children in the world? She replied, "How can there be too many children? That is like saying there are too many flowers."

When are we going to realize the value that each one of these "flowers" that God has willed to be planted has for us? When will we ever mourn the loss of life like that "Gold Star" mother did?

The song ended with the haunting lyrics, "When will we ever learn, when will we ever learn?" Let us pray that we do.

R. Thomas Forr, Jr., President Blair County Chapter, Citizens Concerned for Human Life



## Donations have been made—

In Honor of:

**Pro-Life Work**Requested by: Pat Gildea

Irv Cavalet
Requested by: Donna Houck

In Memory of:

Deceased Fathers

of McNelis All-Stars

of McNelis All-Stars Requested by: Chris McNelis

Patrick Myers
Requested by: Terry & Ethel Myers

Donna & Loretta Zeth
Requested by: Debbie Boland

Angela Conley
Daughter of Mrs. Nancy McCreary

Donations may be made in memory of loved ones who have died or to honor someone special, for a particular occasion, or just because...

Blair County *Life News* will publish your name as well as the names of those you are honoring and/or remembering.

Send donations to Blair Co. CCHL, 2715 Third St., Altoona, PA 16601. Thank you!

We acknowledge, therefore, that life begins with conception because we contend that the soul begins at conception.

Life begins when the soul begins.

~ Tertullian, 3rd century ~

Blair County CCHL believes that human life has value in all stages of development from conception until natural death, and is committed to speaking on behalf of those who cannot speak for themselves — the unborn, the aged, the incapacitated. Won't you please help in our struggle to preserve respect for human life? A contribution brings you our quarterly newsletter. Thank you!

Annual Membership Student/Senior Member	\$10.00 \$5.00	In Memory of: In Honor of:		
Name			_Phone	
Address		City		Zip
Email address				

Please complete this form and return with your donation to: Blair County Chapter, CCHL, 2715 Third St., Altoona, PA 16601. For more information, call 814-946-0681. Sorry, donations are not tax-deductible.

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# Patients are Increasingly Starved to Death—Withdrawal of Food and Water Called "Medical Care"

By Bobby Schindler

Recently, there has been a flurry of American writers commenting on MAID, the acronym for medical assistance in dying (government sanctioned doctor assisted suicide) in Canada. These articles are a reaction to Canadian lawmakers who are contemplating whether they should permit doctor assisted suicide for minors.

Here in the U.S., there are 10 states and Washington, DC that have doctor assisted suicide laws after Oregon became the first state to legalize it in 1994. Having fought against anti-life enthusiasts for over 20 years, I sincerely thought assisted suicide proponents would have had more success by now. But because of a well-organized coalition of individuals and groups working together, including the disability community, much of this pro-death agenda has been prevented—at least for the time being.

However, what often gets overlooked is that assisted suicide is only one of the weapons in the culture-of-death arsenal that is used to end the lives of those who are medically vulnerable—either physically or mentally.

If you are one of the relatively few who have been paying attention to this issue and the expanding number of changes in the laws and the policies in healthcare, then you are quite familiar with how susceptible patients are being denied their autonomy, resulting in their medical care being withdrawn.

Consider the revisions that have taken place that can be traced back for decades. The administration of food and water via feeding tubes used to be recognized as ordinary care. Today, it has been redefined as medical treatment and now it is legal in all 50 states to have this most basic right either denied or withdrawn.

Imposing "futile care policies" on patients to stop treatment is common. (These futile care decisions are typically made by unaccountable ethics committees that recommend whether a patient should continue to receive medical care.)

The determination of brain death is a diagnosis that is many times too quickly asserted allowing a patient's organs



to be harvested. The subjective, and therefore unreliable persistent vegetative state (PVS) diagnosis is placed on those with brain injuries to discourage necessary long-term care, but even more disturbing is that it qualifies the patient to have their treatment stopped.

Arbitrary placement of a DNR (do not resuscitate order) on patients without their consent is allowed. And a somewhat newer method of prescribed death that is being practiced, "terminal sedation," which is being performed by administrating drugs like morphine with the intent of ending a patient's life.

These are some of the medical atrocities that are happening in healthcare—a form of social engineering—used to eliminate those who are 'bankrupting' its financial resources. Government bureaucrats and other forces—including the insurance industry—view today's healthcare landscape as an impossible struggle to contain cost, so absent any serious legislative undertaking, protecting our medically defenseless population from these types of anti-life policies is futile.

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